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FEB 1 9 2008

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Rose A Nagel (Depositor's name) ARRIVER (Signature)

חת מסיימה ביסור				February 19, 2008		(Date)
APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR			ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/680,473	10/07/2003	Laszlo T Nemeth		108089	5206	
TITLE OF INVENTION:						
•						
APPLN, TYPE	SMALL ENTITY	ISSUE FE	E	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1440	1	\$300	\$1740	02/19/2008
EXAM	1INER	ART UNIT		CLASS-SUBCLASS]	
CFR 1.363). Change of correspond Address form PTO/SB/I "Fee Address" indication PTO/SB/47: Rev 03-02 of Number is required. 3. ASSIGNEE NAME ANE		Correspondence ation form of a Customer SE PRINTED ON Tolow, no assignce cof this form is NOT (B)	(1) the names of or agents OR, a (2) the name of registered attorn 2 registered pat listed, no name HE PATENT (printlets will appear of a substitute for fi	a single firm (having as ney or agent) and the na ent attorneys or agents. I will be printed. at or type) In the patent. If an assigning an assignment. TYY and STATE OR CO	an ember a 2 2 3 3 3 3 3 4 5 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6	E GÓODING document has been filed for
4a. The following fee(s) are Issue Fee	enclosed:	4b. ∞d)	Payment of Fee(s A check in the Payment by cr	e): amount of the fee(s) is odit card. Form PTO-20.		
a. Applicant claims S	(from status indicated above MALL ENTITY status. See is requested to apply the lss subjication Fee (if required) ords of the United States Pat	37 CFR 1.27.			ALL ENTITY status. See 37 (sly paid issue fee to the applie gistered attorney or agent, or	

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

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PTOL-85 (Rev. 08/07) Approved for use through 08/31/2010. OMB 0651-0033

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Typed or printed name Arthur E Gooding

Authorized Signature

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Date February 19, 2008 Registration No. 50,513

02/19/08 FAX 847 391 2387

PTC/SB/17 (10-07) Approved for use through 06/30/2010, QMB 0651-0032

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FEE TRANSMITTAL For FY 2008			Application Number 10/680,473			
			Filing Date	1	10/07/2003	
			First Named Invei	ntor L	Laszlo T Nemeth	
			Examiner Name	c	Cephia D Toomer	
Applicant claims small entity status. See 37 CFR 1.27		Art Unit 1797				
TOTAL AMOUNT OF PAYMENT	(\$)	1740	Attorney Docket N	No. 1	08089	
METHOD OF PAYMENT (che	ck all that ap	opty)				,
Check Credit Card Money Order None Other (please identify):						
Deposit Account Deposit A	ocount Number	01-1125	Deposit Acco	ount Nam	e: <u>Honeywell Inte</u>	rnational
For the above-identified de	posit account,	the Director is he	reby authorized to: ((check a	ll that apply)	
Charge fee(s) indica	ted below		Charge	fee(s) ir	idicated below, excep	pt for the filing fee
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Information and authorization on PTC	-2038.					
FEE CALCULATION	AID EVALUE					
1. BASIC FILING, SEARCH, A	ING EXAMI		CH FEES	FXAMI	NATION FEES	
Application Type Fee	Small Er	ntity	Small Entity	Fee (Small Entity	Fees Paid (\$)
Utility 310		5) <u>Fee (\$</u> 510	255	210	105	1 000 1 110 (4)
Design 210		100	50	130	65	
Plant 210		310	155	160	80	
Reissue 310		510	255	620	310	
Provisional 210		0	0	0_0	0	
2. EXCESS CLAIM FEES	, 103	v	Ū	Ū	ŭ	mail Entity
Fee Description					Fee (\$)	Fee (\$)
Each claim over 20 (include Each independent claim over	_	•			50 210	25 105
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Manapio dependent elatino					ndent Claims	
20 or HP =	x _				Fee (\$)	Fee Paid (\$)
HP = highest number of total claims			Paid (\$)			
Indep. Claims Extra Claims Fee (\$) Fee Paid (\$) - 3 or HP =x						
HP = highest number of independent claims paid for, if greater than 3.						
3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer						
listings under 37 CFR 1.52(e)), the application size fee due is \$260 (\$130 for small entity) for each additional 50						
sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$) - 100 = /50 = (round up to a whole number) x =						
4. OTHER FEE(S) Non-English Specification, \$130 fee (no small entity discount) Fees Paid (\$)						
Other (e.g., late filing surcharge): 1501 Utility Issue Fee (\$1440) 1504 Publication Fee (\$300) 1740						
Other (e.g., late filling surcharge). 1501 Utility Issue Fee (\$1440) 1504 Publication Fee (\$300) 1740						

SUBMITTED BY			
Signature	arthur E gooding	Registration No. (Attorney/Agent) 50,513	Telephone 847 391-1520
Name (Print/Type)	. //:		Date February 19, 2008

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